

December 8, 2017

United State Bankruptcy Court  
1 John F Gerry Plaza  
4<sup>th</sup> Cooper Streets  
Camden, NJ 08101

Re: Carol L Anisi - Chapter 13 – Case No.: 16-33204 – Judge JNP

**OPPOSITION TO RELIEF SOUGHT BY ALLY FINANCIAL TO MODIFY THE  
AUTOMATIC STAY AND CO-DEBTOR STAY**

Dear Sir or Madam:

Please be advised that I wish to oppose the Notice of Motion to Modify the Automatic Stay in my Chapter 13 Bankruptcy filing. I wish to have a Hearing scheduled should this matter not be resolved prior.

I have been stricken with medical and mental issues as well as other unforeseen occurrences that have made it almost impossible for me to keep current on post-petition payments. I am at this moment in a much better position but do not know how to cure the arrearages without some guidance.

I would like to propose a payment plan along with the payments being made to my creditors in this Chapter 13 plan. (I have 36 months left in the plan).

I would like to propose the \$4,236.54 default to be divided by the 36 months left which would make my monthly payment to be \$502.82. This equals the regular monthly payment of \$385.14 plus \$117.68 for the next 36 months. At the end of the 36 months I would have paid \$18,101.52 plus the pre-petition amount being paid through the plan of \$1,035.93 for a total of \$19,137.45. I have already paid almost 3 years of payments prior to the filing of the Chapter 13 petition. I can start these payments immediately.

I have reached out to John Morton, Esquire with regard to a payment arrangement but have not heard from him as of the date of this letter.

If this arrangement is not satisfactory, please provide a counter to this arrangement. I do not and cannot have this vehicle repossessed. I have also attached my current insurance card as proof that the vehicle is insured protecting the creditors collateral.

I hope that you will work with me. Thank you for your attention to this matter.


Sincerely,



Carol L. Anisi

615 Autumn Crest Drive  
Waterford, NJ 08089  
[canisi@jacobsllawoffice.com](mailto:canisi@jacobsllawoffice.com)  
856-357-0039

cc: Lee Abt, Esq  
John R Morton, Esq  
Isabel Balboa, Trustee

**FILED**  
JEANNE A. NAUGHTON, CLERK  
DEC 11 2017  
U.S. BANKRUPTCY COURT  
CAMDEN, N.J.  
BY  DEPUTY

# Identification Cards

PLEASE PLACE EACH CARD IN THE APPROPRIATE INSURED VEHICLE.

## STATE OF NEW JERSEY INSURANCE IDENTIFICATION CARD



**POLICY INFORMATION**  
Policy Number  
AOJ-231-225556-75 7 3  
Policy Effective Date  
12/01/2017  
Policy Expiration Date  
12/01/2018

**VEHICLE INFORMATION**  
Year 2010  
Make VOLKSWAGEN  
Model GTI  
Vehicle Identification Number  
WVWED7AJ9AW417819

**CONTACT US**  
To report a claim  
1-800-2CLAIMS  
(1-800-225-2467)  
Customer service  
1-800-658-9501

**Name of Insured**  
CAROL ANISI  
CHARLES ANISI  
615 AUTUMN CREST DR  
WATERFORD WORKS NJ 08089-2105

**Card Effective Date**  
12/01/2017  
**Card Expiration Date**  
12/01/2018

Company Name: 370 WAUSAU UNDERWRITERS INSURANCE COMPANY  
NAIC Number: 26042  
PKMT 537 04 10

SEE IMPORTANT MESSAGE ON REVERSE SIDE.

### PLACE THE FOLLOWING IN YOUR CAR:

- Please do the following without delay:
1. Check the surname and vehicle description on your "ID" card to make sure they agree WITH YOUR AUTOMOBILE REGISTRATION.
  2. Check the vehicle identification number on your card to make sure it agrees WITH YOUR REGISTRATION.
  3. If any of the above items are incorrect do not alter your "ID" card. Instead, contact the Liberty Mutual Service Office shown to secure a corrected card.
  4. Place this card in the glove compartment of the car described and have it in the car at all times. It will be needed when you have your car inspected or if you are involved in a traffic violation, an accident or a spot road check.



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PKMT 537 04 10

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### WHAT TO DO IN CASE OF AN ACCIDENT

1. When possible, move your vehicle out of harm's way (if allowed by local law) and turn off the ignition.
2. Call for medical assistance if necessary.
3. Contact the police. A police report will help to protect you from potential liability claims and legal action.
4. Exchange the following information with involved parties:
  - Names • Driver's license numbers • Addresses
  - Insurance company information
5. Note weather and road conditions.
6. Record the names and telephone numbers of any witnesses.
7. Contact Liberty Mutual immediately to report the accident.



SEE IMPORTANT MESSAGE ON REVERSE SIDE.

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